

**TRANSFER/PROMOTION/PT-to-FT PAPERWORK CHECKLIST**

EMPLOYEE TRANSFERRING: OUT \_\_\_\_ IN \_\_\_\_

NAME OF EMPLOYEE \_\_\_\_\_

EMPLOYEE NO: \_\_\_\_\_ RECORD No: \_\_\_\_

RECEIVED	DESCRIPTION OF FORM OR DOCUMENT	EXPLANATION
	At-will Status Acknowledgement	Management/Confidential Only
	Deputy Oath (Sheriff – Sworn)	For sworn job classifications-County Clerk Form 13
	Promotion more than 5% increase (Manager Only)	Memo when applicable
	Work Week Declaration / Fair Labor Standards Act	Revised 11/15
	Personnel Action Form - PAF	Report is generated from PeopleSoft

SPECIAL PAYS, ETC...		REQUIRED MEMO/ ETC... IF APPLICABLE
<u>PLEASE INDICATE ON PAF IF CONTINUING OR ENDING ANY ADDITIONAL PAYS</u>		

CURRENT WORK ACCOMODATIONS	NO <input type="checkbox"/>	YES <input type="checkbox"/>
FORWARD TO NEW DEPARTMENT	NO <input type="checkbox"/>	YES <input type="checkbox"/>

IS EMPLOYMENT TRANSFER PART TO FULL TIME?		IF YES COMPLETE THIS SECTION – IF NO CONTINUE TO NEXT SECTION
RECEIVED	DESCRIPTION OF FORM OR DOCUMENT	EXPLANATION
	Universal Benefit Enrollment Form <b>**All Benefit forms should be sent directly via email to: CountyBenefits@stancounty.com</b>	PT to FT Only To add/change dependent information-Revised 10-08
	Deferred Compensation – Enrollment packets from Mass Mutual. These packets are available from the CEO-Risk Management Division Employee Benefit Website.	Required for new Management/Confidential employees only. The forms are in the back of the packet.
	Personnel Action Form – PAF	Report is generated from PeopleSoft

**DEPARTMENT TO COMPLETE**

Received Copy of Application Form YES <input type="checkbox"/>	Requisition Number:	Exam Plan:
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**PLEASE SUBMIT ALL FORMS TOGETHER TO THE CHIEF EXECUTIVE OFFICE/HUMAN RESOURCES UNIT**

Prepared by:	Department:
Date of Completion:	Name of Payroll Clerk: